

Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

2018 APR -2 PM 2:08

Fill in Re	eporting Period dates: Beginning Date: Fet	,d	File with: City or Town Clerk or Election Co	ommission
I III III IC	eporting Period dates: Beginning Date: Feb	oruary 16, 2	018 Ending Date: March 30, 2018	
Type of	Report: (Check one)		State of the state	
our day	y preceding preliminary \(\sime\) 8th day preceding election	30 day	y after election year-end report dissolut	tion
A. Michae	l Ruderman	Comm	ittee to Floriday on the	
	Candidate Full Name (if applicable)	- COITIII	ittee to Elect Mike Ruderman Committee Name	
Selectman	n, Town of Arlington	Susan	Cronin Ruderman	
O Alton Ct	Office Sought and District		Name of Committee Treasurer	
9 AILUII SL	reet, Arlington MA 02474 Residential Address	9 Alton	Street, Arlington MA 02474	
E-mail:	amruderman@gmail.com		Committee Mailing Address	
Phone # (opti		- E-mail:	ruderman@comcast.net	
Thone # (opti	onal): 781-929-7847	Phone # (optional):	
	SUMMARY BALAN	CE INFO	RMATION.	
	Line 1: Ending Balance from previous report		Tavarion.	
	Line 2: Total receipts this period (page 3, line 11	1)	\$5,225.00	
40	Line 3: Subtotal (line 1 plus line 2)		\$5,225.00	
	Line 4: Total expenditures this period (page 5, li	ne 14)	\$4,877.59	
	Line 5: Ending Balance (line 3 minus line 4)		\$347.41	
	Line 6: Total in-kind contributions this period (p	age 6)	\$145.00	
	Line 7: Total (all) outstanding liabilities (page 7))	-0-	
	Line 8: Name of bank(s) used: Watertown Savings	; Bank		
I certify that I I activity, includ finance activity Signed under	ommittee Treasurer: have examined this report including attached schedules and it is, to the besting all contributions, loans, receipts, expenditures, disbursements, in-kind of all persons acting under the authority or on behalf of this committee in the penalties of perjury:	n accordance w	edge and belief, a true and complete statement of all campaign fina and liabilities for this reporting period and represents the campaign ith the requirements of M.G.L. c. 55. (Treasurer's signature) Date: March 30, 2016	1
FOR CANI	DIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 be	ox only)		
Candidat I certify the activity, or incurred a	e with Committee and no activity independent of the committee nat I have examined this report including attached schedules and it is, to the fall persons acting under the authority or on behalf of this committee in an any liabilities nor made any expenditures on my behalf during this reporting	e best of my kn ccordance with g period.	the requirements of M.G.L. c. 55. I have not received any contribu	i finance outions,
Candidate I certify the finance ac campaign	e without Committee OR Candidate with independent activity filing so that I have examined this report including attached schedules and it is, to the tivity, including contributions, loans, receipts, expenditures, disbursement finance activity of all persons acting under the authority or on behalf of the penalties of perjury:	eparate report e best of my kn	owledge and belief, a true and complete statement of all campaign	
			(Candidate's signature)	

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
2/22/2018	Harold J. Allen 7 Bacon Street, Arlington MA 02476	300.00	owner, Arlmont Fuel
3/9/2018	Dean E. Carman 29 Kilsythe Road, Arlingotn MA 02476	400.00	Vice President of Finance, Bertucci's Corp.
3/16/2018	Frank J. Ciano 230 Monsignor O'Brien Highway, Cambridge MA 02141	25.00	
3/22/2018	Darcy Campion Devney 110 Thorndike St., Arlington MA 02474	50.00	
3/4/2018	Wynelle Evans 20 Orchard Place Arlington MA 02476	50.00	
3/22/2018	Charles T Foskett 101 Brantwood Road, Arlington MA 02476	100.00	
3/20/2018	Stephen J. Gilligan 77 Falmouth Road, Arlington MA 02474	100.00	
3/17/2018	DAVID S GREEN 1619 NE 4th Court FORT LAUDERDALE FL 33301	200.00	Assistant Vice President, Development, Florida Atlantic University
3/7/2018	Mary Hilt 250 Mountain Avenue, Arlington MA 02474	200.00	artist, self-employed
/24/2018	Mary Hilt 250 Mountain Avenue, Arlington MA 02474	100.00	artist, self-employed
/4/2018	Janet L. Johnson 5725 GOVERNORS POND CIR ALEXANDRIA VA 22310	300.00	Radiologic Technologist, Washington Radiology
/5/2018	Phillip Lohnes 22 Bartlett Avenue Arlington MA 02476	1,000.00	Senior Director of Finance and Operations, Nantero Inc.
ine 9: Total Recei	pts over \$50 (or listed above)		,
ine 10: Total Rece	ipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD receipts of \$50 and under, include them in line 9		← Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Stephanie L. Lucarelli 20 Laurel Street, Arlington MA 02476	200.00	Town Clerk, Town of Arlington
Kathleen Morris 13 Alton Street, Arlington MA 02474	25.00	
Dorothy Nash-Webber 60 Bartlett Ave., Arlington MA 02476	30.00	
Paul E. Olsen 89 Wright Street, Arlingotn MA 02474	100.00	
Linda K. Olsen 89 Wright Street, Arlingotn MA 02474	75.00	
Paul L Parise 106 Hemlock St Arlington MA 02474	100.00	
Elizabeth A. Peck 16 Orchard Place Arlington MA 02476	25.00	
Jo Ann Preston 42 Mystic lake Drive, Arlington MA 02474	50.00	
Elizabeth M Pyle 66 Gloucester Street Arlington MA 02476	100.00	
Joyce Radochia 45 Winter Street, Arlington MA 02474	50.00	
lisa m reynolds 1 Pond Terrace, Arlington MA 02474	25.00	
Mary E. Ruddy 22 Bartlett Avenue Arlington MA 02476	1,000.00	Vice President, Gartner Research
SUSAN C RUDERMAN 9 Alton Street Arlington MA 02474	10.00	
ipts over \$50 (or listed above)		
eipts \$50 and under* (not listed above)		
RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
	(alphabetical listing required) Stephanie L. Lucarelli 20 Laurel Street, Arlington MA 02476 Kathleen Morris 13 Alton Street, Arlington MA 02474 Dorothy Nash-Webber 60 Bartlett Ave., Arlington MA 02476 Paul E. Olsen 89 Wright Street, Arlingotn MA 02474 Linda K. Olsen 89 Wright Street, Arlingotn MA 02474 Paul L Parise 106 Hemlock St Arlington MA 02474 Elizabeth A. Peck 16 Orchard Place Arlington MA 02476 Jo Ann Preston 42 Mystic lake Drive, Arlington MA 02474 Elizabeth M Pyle 66 Gloucester Street Arlington MA 02476 Joyce Radochia 45 Winter Street, Arlington MA 02474 lisa m reynolds 1 Pond Terrace, Arlington MA 02474 Mary E. Ruddy 22 Bartlett Avenue Arlington MA 02476 SUSAN C RUDERMAN 9 Alton Street	(alphabetical listing required)AmountStephanie L. Lucarelli 20 Laurel Street, Arlington MA 02476200.00Kathleen Morris 13 Alton Street, Arlington MA 0247425.00Dorothy Nash-Webber 60 Bartlett Ave., Arlington MA 0247630.00Paul E. Olsen 89 Wright Street, Arlingotn MA 02474100.00Linda K. Olsen 89 Wright Street, Arlingotn MA 0247475.00Paul L Parise 106 Hemlock St Arlington MA 02474100.00Elizabeth A. Peck 16 Orchard Place Arlington MA 0247625.00Do Ann Preston 42 Mystic lake Drive, Arlington MA 0247450.00Elizabeth M Pyle 66 Gloucester Street Arlington MA 02474100.00Doyce Radochia 45 Winter Street, Arlington MA 0247450.00Ilisa m reynolds 1 Pond Terrace, Arlington MA 0247625.00Mary E. Ruddy 22 Bartlett Avenue Arlington MA 024761,000.00SUSAN C RUDERMAN 9 Alton Street Arlington MA 0247410.00sipts over \$50 (or listed above)1,000.00

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

Committee Name:	Committee to Elect Mike Ruerman

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SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/8/2018	Gary Shostak 4 Pamela Drive Arlington MA 02474-2121	100.00	(101 Contributions of \$200 of more)
3/26/2018	J. Dirck Stryker 60 Bartlett Ave., Arlington MA 02476	50.00	
3/19/2018	MARTIN THROPE 348 GRAY ST ARLINGTON MA 02476	100.00	
3/18/2018	Robert L Tosi Jr 14 Inverness Road Arlington MA 02476	50.00	
2/22/2018	Jennifer Watson 66 Mott Street, Arlington MA 02476	10.00	
3/7/2018	Patricia B. Worden 27 Jason Street, Arlington MA 02476	300.00	retired
-			
·			
Line 9: Total Rece	cipts over \$50 (or listed above)	5225.00	
ine 10: Total Reco	eipts \$50 and under* (not listed above)		
Line 11: TOTAL	RECEIPTS IN THE PERIOD	5225.00	← Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	4.7.7		
Date Faid		Address	Purpose of Expenditure	Amount
3/1/2018	Connolly Printing	17b Gill Street, Woburn MA 01801	ampaign signs	392.5
3/23/2018	Connolly Printing	17b Gill Street, Woburn MA 01801	ousiness cards	74.8
3/27/2018	Connolly Printing	17b Gill Street, Woburn MA 01801	ostcards, postage	3381.7
3/29/2018	A. Michael Ruderman		eimbursement for various expenditures; see attached list	973.9
3/29/2018	Transaxt.com	190 Monroe Ave NW #500, Grand Rapids MI 49503	nline donation processing	54.46
		Line 12: Total Expenditures over	\$50 (or listed above)	\$4,877.59
		Line 13: Total Expenditures \$50 as		
	Enter on page 1, line 4 → mized expenditures of \$50 and under		RES IN THE PERIOD	\$4,877.59

If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above. Page 4

Committee to Elect Mike Ruderman

Report of March 30, 2018

Schedule B: Expenditures, Page 2

Detail of reimbursement to A. Michael Ruderman, 3/29/2018

Date 2/25/2018 3/10/2018 3/17/2018	Payee GoDaddy Beats for Eats Staples Arlington Chamber of	Purpose domain name hosting fundraiser binders, printing flyers	Amount \$10.67 \$50.00 \$181.83
3/20/2018 3/27/2018 3/27/2018 3/27/2018 3/29/2018	Commerce Staples USPS Staples Facebook Jimmy's Steer House, Singh Saab, Shangai	banquet, fundraiser thank you cards stamps banner advertisements	\$65.00 \$11.68 \$20.00 \$94.13 \$380.86
various	Village, Olympic Pizza	meals for campaign staff	\$159.78

Sum

\$973.95

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 6 on page 1.

Date Received	- Traditi Received	Residential Address	Description of Contribution	Value
3/18/2018	Elizabeth Pyle	66 Gloucester Street Arlington MA 02476	food, drink	45.0
3/24/2018	John Worden	27 Jason Street, Arlington MA 02476	food, drink	100.0
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	-			
		Line 15: In-Kind Contributions	over \$50 (or listed above)	145.00
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	145.00

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amoun
			ı	
-	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANDIN	GLIARH ITTES (ALL)	NONE